

**Department of Health and Family Services
HFS 36 Comprehensive Community Services (CCS)**

**Additional Instructions for Completing a CCS Application Packet
and All Required Policies and Procedures**

Department staff have had the opportunity to review and comment on several CCS applications submitted by county agencies. Through this review process we have observed and learned that the instructional information we previously provided is not as complete as we would like it to be in order to obtain all the necessary information needed to review each application. We have therefore developed these additional instructions. In addition, for your convenience, we have included all the necessary policy and procedures identified in HFS 36 that must be included in the CCS application packet.

The application packet from BQA is the official application format for provisional certification. Completion instructions are found on pages 3-4 in the application packet. Please also adhere to the following additional instructions:

Format

1. Number the pages consecutively in the body of the narrative.
2. Label each narrative or policy with the HFS 36 section to which it refers.
3. Reference attachments by number.
4. Limit the narrative description of the application to 30 pages (not including budget pages and attachments).
5. Use no smaller than 11-point font.
6. If an electronic version of the CCS application is made available (and accessible) to BQA, the county only has to submit one signed copy of the application, rather than three copies.
7. If your application has more than eight attachments, include an index of appendices with descriptive titles.
8. Be sure the CCS Staff Listing and CCS Psychosocial Rehabilitation Service Array (forms) are completed and returned with the applications. According to HFS 36.03(29), the staff list should include persons employed by the county agency, tribe, or contracted agency.

9. A copy of the admissions agreement, as required in HFS 36.13, must be included in the application.

The Coordinating Committee

1. The CCS Coordinating Committee must review and comment on the application before it is submitted to BQA. These comments should be included in the application.
2. Over the course of time, the Coordinating Committee may ask for clarifications and changes in the CCS plan or services. The county must respond to concerns raised. We suggest that in order to avoid a potential conflict of interest, county agency mental health and substance abuse staff or administrators should probably not chair this committee.
3. The CCS Coordinating Committee membership should represent the populations served and should cover the life span; i.e., if the county plans to use the ISP Coordinating Committee as the CCS Coordinating Committee, consumers representing adults and elderly must be added to the committee.

Clarifications

1. The application needs to estimate how many consumers the county plans to serve in the first year of operation.
2. The CCS can start small (i.e., focusing on only one age and/or disability category), but the plan must indicate within the first year when all CCS target populations will be served, i.e., a timeline for full implementation. Target populations include all age categories for individuals with serious mental illness, substance use disorders, or a dual diagnosis of mental illness and substance abuse. In addition, if an agency wants to implement its CCS by focusing upon one age category, CCS services must still be available to anyone requesting services who meet eligibility criteria. In other words, if a county enrolls only children during the implementation phase but an eligible adult requests CCS services, the county must be able to provide the assessment, develop a recovery treatment plan, and provide CCS services.
3. If there is a separate department of social services and department of community programs in a county, the CCS must address collaborative efforts between the two agencies for consumers who may require services and supports from both agencies, i.e., children in the child welfare system who have mental health and/or substance abuse issues.
4. Department has developed a vision statement for CCS along with indicators to help implement the vision. We suggest that county agencies, in collaboration with their Coordinating Committees, also develop a vision/mission statement for their CCS. If a county has adopted a vision or mission statement or has written something that

explains how the CCS application was developed, it would be helpful to include these materials in the application.

5. Section 36.07(3)(a) says Processes necessary to include the CCS in planning to support consumers who are discharged from a non-CCS program or facilities that include inpatient psychiatric or substance-use treatment, a nursing home, residential care center, day treatment provider, jail or prison.

Here counties can tell us how the CCS will interface with non-CCS facilities so that, as part of discharge planning, these other facilities would contact CCS and potentially refer new consumers to the CCS. It appears the language has been interpreted by some counties to mean that CCS would become involved in discharge planning for its own consumers, but this was not our intent.

6. Programs shall keep all HFS 36-specific policy and procedure manual(s) onsite and easily accessible to consumers, staff, and reviewers.
7. The CCS application must include an outreach plan that explains how the county plans to identify and contact individuals who may be eligible for and need or want CCS services. This should include having referral agreements with other service providers, i.e., psychiatric inpatient units, residential facilities, outpatient clinics, and other community treatment and service providers.

To ensure that your application is complete, refer to the list of CCS Required Policies and Procedures that follows:

CCS Required Policies and Procedures

- Certification application materials. HFS 36.04 (2)

The application shall be accompanied by all of the following: (a) required fees, (b) a copy of the comprehensive community services plan developed under s. HFS 36.07, (c) a copy of the personnel policies and procedures developed under s. HFS 36.10 and operational policies developed, (d) a copy of any previously approved waiver or variance and information on the current status, and (e) any other information required by the department.

CCS PLAN 36.07

- CCS Plan, quality improvement. HFS 36.07 (1)(b)

Each CCS program shall have a written plan that shall include a description of the organizational structure. The description shall include policies and procedures to implement a quality improvement plan consistent with the requirements in s. HFS 36.08.

- CCS Plan, coordination committee. HFS 36.07 (1)(c)

Each CCS program shall have a written plan that shall include a description of the organizational structure. The description shall include policies and procedures to

establish a coordination committee and work with a coordination committee consistent with the requirements in s. HFS 36.09.

- CCS Plan, revising plan. HFS 36.07 (1)(e)

Each CCS program shall have a written plan that shall include a description of the organizational structure. The description shall include policies and procedures for updating and revising the CCS plan to ensure that it accurately identifies current services provided and any changes in policies and procedures of the CCS.

- CCS plan, service descriptions. HFS 36.07 (3)

Each CCS program shall have a written plan that shall include a description of the currently available mental health, substance-use disorder, crisis services, and other services in the county or tribe and how the CCS will interface and enhance these services. The description shall include policies and procedures for developing and implementing collaborative arrangements and interagency agreements.

- CCS Plan, policies and procedures. HFS 36.07 (5) (a-s)

Each CCS program shall have a written plan that shall include policies and procedures developed for:

a) consumer records that meet the requirements in s. HFS 36.18.

b) confidentiality requirements of this chapter per s. HFS 36.19 (see s. 36.08).

c) the timely exchange of information between the CCS and contracted agencies necessary for service coordination (see s. 36.17).

d) consumer rights that meet the requirements of s. HFS 36.19.

e) monitoring compliance with this chapter and applicable state and federal law.

f) receiving and making referrals.

g) communication to the consumer of services offered by the CCS, costs to the consumer, grievance procedure, and requirements for informed consent for medication and treatment (see s. 36.18).

h) ensuring that a consumer's cultural heritage and primary language are considered as primary factors when developing the consumer's service plan and that activities and services are accessible in a language in which the consumer is fluent (see s. 36.17).

i) providing orientation and training that meets the requirements in s. HFS 36.12.

j) outreach services.

k) application and screening (see s. 36.13).

- l) recovery team development and facilitation (see s. 36.16).
- m) assessment (see s. 36.16).
- n) service planning (See s. 36.17).
- o) service coordination, referrals, and collaboration. (See s. 36.17)
- p) advocacy for the consumer. (See s.36.16)
- q) support and mentoring for the consumer. (See s.36.16)
- r) discharge planning and facilitation. (See s.36.17)
- s) monitoring and documentation. (See s.36.18)

COORDINATION COMMITTEE HFS 36.09

- Committee, duties. HFS 36.09 (3)(a)

The coordinating committee shall do all of the following:

- (a) Review and make recommendations regarding the initial and any revised CCS plan required under s. HFS 36.07, the CCS quality improvement plan, personnel policies, and other policies, practices, or information that the committee deems relevant to determining the quality of the CCS program and protection of consumer rights.

PERSONNEL POLICIES HFS 36.10

- Personnel Policies, discrimination. HFS 36.10 (2)(a)

The CCS shall have and implement written personnel policies and procedures that prohibit discrimination. Employment practices of the CCS or any agency contracting or subcontracting with the CCS do not discriminate against any staff member or applicant for employment based on the individual's age, race, religion, color, sexual orientation, national origin, disability, ancestry, marital status, pregnancy or childbirth, or arrest or conviction record.

- Personnel, credentials. HFS 36.10 (2)(b)

The CCS shall have and implement written personnel policies and procedures that ensure staff members have the professional certification, training, experience and abilities to carry out prescribed duties.

- Personnel, background checks. HFS 36.10 (2)(c)

The CCS shall have and implement written personnel policies and procedures that ensure background ground checks and misconduct reporting and investigation. CCS and contracting agency compliance with the caregiver background check and misconduct

reporting requirements in s. 50.065, Stats., and ch. HFS 12, and the caregiver misconduct reporting and investigation requirements in ch. HFS 13.

PERSONNEL POLICIES HFS 36.10

- Personnel, staff records. HFS 36.10 (2)(d)

The CCS shall have and implement written personnel policies and procedures that ensure staff records. Staff member records are maintained and include all of the following:

1. References for job applicants obtained from at least 2 people including previous employers, educators or post-secondary educational institutions attended if available, and documented either by letter or verification of verbal contact with the reference, dates of contact, person making the contact, individuals contacted and nature and content of the contact.
2. Confirmation of an applicant's current professional license or certification, if that license or certification is necessary for the staff member's prescribed duties or position.
3. The results of the caregiver background check conducted in compliance with par. (c), including a completed background information disclosure form for every background check conducted, and the results of any subsequent investigation related to the information obtained from the background check.

- Staffing policies and functions. HFS 36.10 (2)(e)1-4.

The CCS shall have and implement written personnel policies and procedures that ensure staff functions. The CCS has the appropriate number of staff to operate the CCS in accordance with the CCS plan, this chapter, and applicable state and federal law. One or more staff members shall be designated to perform all of the following functions:

1. Mental health professional and substance abuse professional functions.
2. Administrator functions.
3. Service director functions.
4. Service facilitation functions.

- Staff functions, administrator. HFS 36.10 (2)(e)2.

One or more staff members shall be designated to perform the administrator functions. A staff member designated to perform these functions shall have the qualifications listed under par. (g) 1. to 14. whose responsibilities shall include overall responsibility for the CCS, including compliance with this chapter and other applicable state and federal regulations and developing and implementing policies and procedures.

- Personnel, supervision. HFS 36.10 (2)(f)

The CCS shall have and implement written personnel policies and procedures that ensure supervision and clinical collaboration. Supervision and clinical collaboration of staff shall meet the requirements in s. HFS 36.11.

- Personnel, minimum qualifications. HFS 36.10 (2)(g)

The CCS shall have and implement written personnel policies and procedures that ensure minimum qualifications. Each staff member shall have the interpersonal skills training and experience needed to perform the staff member's assigned functions and each staff

member who provides psychosocial rehabilitation services shall meet the minimum qualifications.

ASSESSMENT PROCESS HFS 36.16

- Assessment, policies and procedures. HFS 36.16 (1)

The CSS shall implement policies and procedures that address the requirements under this section including: facilitation, assessment criteria, assessment domains, abbreviated assessment, assessment summary, and recovery team.

SERVICE PLANNING AND DELIVERY PROCESSES HFS 36.17

- Service planning and delivery, policies and procedures. HFS 36.17 (1)

The CCS shall implement policies and procedures that address the requirements under this section: facilitation of service planning, service plan documentation, service plan review, service delivery, and discharge.